



Department of Medical Assistance Services  
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# MEDICAID PROVIDER MANUAL UPDATE

TO: All Nursing Facility Providers participating in the Virginia Medical Assistance Programs

FROM: Patrick W. Finnerty, Director  
Department of Medical Assistance Services (DMAS)

MEMO: Special

DATE: 11/03/2006

SUBJECT: Update to the Nursing Facility Provider Manual

The purpose of this memorandum is to notify you of changes to your Nursing Facility Provider Manual. The attached table shows the changes to the Provider Manual. Please download the new pages to insert into your Provider Manual and retain the table attached below. Please review these changes carefully.

## **RESIDENT READMISSION AFTER HOSPITAL STAY OR THERAPEUTIC LEAVE**

DMAS does not make payments to a nursing facility for days that a nursing facility resident is hospitalized or on therapeutic leave. A resident or his family may choose to hold a bed, but cannot be required to do so. A nursing facility must allow a resident to return to the next available bed at the time he is ready for discharge from the hospital or return from therapeutic leave.

Pursuant to 42 CFR § 483.12(b)(3), a nursing facility must establish and follow a written policy under which a resident, whose hospitalization or therapeutic leave exceeds the bed-hold period under the State Plan for Medical Assistance, is readmitted to the nursing facility immediately upon the first availability of a bed in a semi-private room if the resident: 1) requires the services provided by the nursing facility, and 2) is eligible for Medicaid nursing facility services.

A nursing facility may **not** refuse to readmit a resident whose hospitalization or therapeutic leave exceeds the bed-hold period under the State Plan for the following reasons:

- The resident has medical and/or behavioral needs that cannot be met by the nursing facility;
- The resident is judged by a physician to be a danger to self or others; or

- The resident (at the time of re-admission) has an outstanding payment to the nursing facility for which he/she is responsible in accordance with Medicaid regulations.

In any of these situations, only if the nursing facility determines that, pursuant to 42 CFR § 483.12(a)(2), the individual does not require the services provided by the nursing facility or that the individual is not eligible for Medicaid nursing facility services, then the facility may initiate transfer or discharge proceedings as allowed by law. If the nursing facility has already issued the 30-day discharge notice to a hospitalized resident or resident who is on therapeutic leave who meets any of these three conditions, and the 30 days have elapsed, the provider must readmit the resident and either wait out the 30-day notice or issue a 30-day notice regarding discharge.

### **COPIES OF MANUALS**

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at [www.dmas.virginia.gov](http://www.dmas.virginia.gov). Refer to the "DMAS Content Menu" column on the left-hand side of the DMAS web page for the "Provider Services" link, which takes you to the "Manuals, Memos and Communications" link. This link opens up a page that contains all of the various communications to providers, including Provider Manuals and Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates that are requested.

### **"HELPLINE"**

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273 Richmond area and out-of-state long distance  
1-800-552-8627 All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.

### **PROVIDER E-NEWSLETTER SIGN-UP**

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics will include changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at [www.dmas.virginia.gov/pr-provider\\_newletter.asp](http://www.dmas.virginia.gov/pr-provider_newletter.asp).

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.

## ***NURSING FACILITY PROVIDER MANUAL***

### **REVISION CHART**

**November 3, 2006**

#### **SUMMARY OF REVISIONS**

<b>MANUAL SECTION</b>	<b>MATERIAL REVISED</b>	<b>NEW PAGE NUMBER(S)</b>	<b>REVISED PAGE(S)</b>	<b>REVISION DATE</b>
Chapter IV	Chapter IV		Pages 19 through 21	11/03/2006

#### **FILING INSTRUCTIONS**

<b>MANUAL SECTION</b>	<b>DISCARD</b>	<b>INSERT</b>	<b>OTHER INSTRUCTIONS</b>
Chapter IV	Old Chapter IV	New Chapter IV	